Application Number

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Application Data Sheet 37 CFR 1.76

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HOLOGRAPHIC READING DEVICE

Title of Invention

FR040221

Portions or all of the ap 37 CFR 5.2 (Paper fi											suant to
Applicant Informat						,					
Applicant 1 Remove											
Applicant Authority • Inventor   Clegal Representative under 35 U.S.C. 117   Party of Interest under 35 U.S.C. 118											
Prefix Given Name Middle Name Family Name							Suffix				
Coen		LIE			IED	EDENBAUM					
Residence Information (Select One) US Residency   Non US Residency Active US Military Service											
City		Coun	try Of Ro	esidencei	Т	NL					
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Mailing Address of Appl	icant:										
Address 1	Address 1 c/o Societe Civile SPID										
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All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button.  Add											
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Email Address	jeanne.rusciano@philips.com Add Email Remove				Email						
Application Information:											
Title of the Invention	HOLOGRAPHIC READING DEVICE										
Attorney Docket Number	FR040221 Small Entity Status Claimed										
Application Type	Nonprovisional										
Subject Matter	Utility										
Suggested Class (if any)					Sub	Class (if	f an	ıy)			
Suggested Technology Center (if any)											
Total Number of Drawing	g Sheets (if a	ny)			Sug	gested F	igu	re for Pub	lication	(if any)	

PTO/SB/14 (08-05)
Approved for use through 07/31/2006. OMB 0651-0332
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

		Attorney Docket	Number F					
Application Data	Sheet 37 CFR 1.76	Application Num	ber					
Title of Invention HOLOGRAPHIC READING DEVICE								
Publication Informat	ion:							
Request Early P	ublication (Fee required a	t time of Request 3	7 CFR 1.219	)				
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b)								
	he invention disclosed in n another country, or und							
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Customer Number	Customer Number 24737							
Domestic Priority Information: This section allows for the applicant to claim benefit under 35 U.S.C. 1198e), 120, 121, or 365(c), Providing this information in the (%), and need not offerwise be made part of the specification.								
Prior Application Status			Remove					
Application Number Continuity Typ		Type Prio	Prior Application Number Filing D			ate (YYYY-MM-DD)		
Additional Domestic Priority Data may be generated within this form by selecting the Add button.								
Foreign Priority Information:								
	This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 118(b) and 37 CFR 1.59(a).							
not claimed. Providing the					y as require	d by 35 U.S.C. 119(b)		
not claimed. Providing the and 37 CFR 1.55(a).	n's information in the applica	tion data sheet const	itules the clain	for priorit	y as required	d by 35 U.S.C. 119(b)		
not claimed. Providing the and 37 CFR 1.55(a).  Application Number	er Countr	y i Pare	itutes the clain	for priorit	y as required	by 35 U.S.C. 119(b) move Priority Claimed		
not claimed. Providing the and 37 CFR 1.55(a).	n's information in the applica	y i Pare	itules the clain	for priorit	y as required RM-DD)	move Priority Claimed  Yes No		
not claimed. Providing the and 37 CFR 1.55(a).  Application Number	er Countr	y i Pare 2003	itutes the clain	(YYYY-I	y as required Ro MM-DD)	by 35 U.S.C. 119(b) move Priority Claimed		
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Application Data Sheet 37 CFR 1.76			Attorney Doc	ket Number	FR040221		
			Application N	umber			
Title of Invention HOLOGRAPHIC READING DEVICE							
Assignee Info	rmati	ion:					
Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office,							
Assignee 1							
If the Assignee is an Organization check here.							
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## button. Signature:

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A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.								
Signature	/Michael E. Marion/		Date (YYYY-MM-DD)	2006-05-23				
First Name	Michael E.	Last Name	Marion	Registration Number	32,266			

Additional Assignee Data may be generated within this form by selecting the Add

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